

LAFAYETTE CONSOLIDATED GOVERNMENT
CIVIL SERVICE SYSTEM
705 WEST UNIVERSITY AVE
P.O. BOX 4017-C
LAFAYETTE, LA 70502
(337) 291-8330

TO FILE AN APPLICATION:

Only the first 80 applications received before the deadline will be accepted. Only U.S. citizens registered to vote and non-citizens authorized to work in the U.S. by the Citizenship and Immigration Services (formerly the U.S. Immigration and Naturalization Services) are eligible to be considered for hiring by the Lafayette Consolidated Government. The deadline may be found in the top right hand corner on the front of the application. Applications will not be accepted after the posted deadline. Applications must also include an original signature. Residents who live in the Lafayette area must turn-in their applications at the Civil Service office. If you live outside the Lafayette area, a copy of the required information must accompany the application before it is accepted. In order for an application to be accepted, the following items are required at the time the application is turned in.

1. Proof of voter registration from the parish in which the applicant resides. This may be obtained from the courthouse in the parish in which you reside.
2. Proof of social security number. If you do not have your SS card, your driver's license or anything with your number **printed** on it will be accepted.

The following item may be turned in at any time **before** the test is given

3. Proof of veteran status; DD214. You must show proof of having served 90 consecutive days of active duty and show proof that you were honorably discharged. Any one showing proof will be awarded five points to a passing grade.

If you have any questions, please feel free to contact our office at 337-291-8330.

DEADLINE: First _____ Including Up To _____ City - Parish Employees Received Before: _____ Noon

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CIVIL SERVICE SYSTEM
705 WEST UNIVERSITY AVENUE
P.O. BOX 4017-C
LAFAYETTE, LOUISIANA 70502
(337) 291-8330

NOTICE:
Resumes will not be
accepted in lieu of
this completed form.

APPLICATION FOR EMPLOYMENT

Fill out this application on typewriter or print in ink. To avoid delay in processing please give complete and accurate information.

IDENTIFICATION

THE FOLLOWING IS NECESSARY TO NOTIFY YOU OF EXAMINATION RESULTS AND/OR INTERVIEWS ONLY.

1.	Position applied for: _____
2.	Name: _____ <div style="display: flex; justify-content: space-between; font-size: small;"> LAST FIRST MIDDLE </div>
3.	Mailing Address: _____ <div style="display: flex; justify-content: space-between; font-size: small;"> Number Street Apartment Number </div> <div style="display: flex; justify-content: space-between; font-size: small;"> City State Zip Code </div>
4.	Phone: _____ DO NOT WRITE IN THIS SPACE <div style="display: flex; justify-content: space-around; font-size: small;"> Home # Work # </div>
5.	Social Security Number: _____

PERSONAL DATA

ANSWER THE FOLLOWING QUESTIONS BY PLACING AN "X" UNDER "YES" or "NO"	YES	NO	SPECIAL QUALIFICATIONS																		
6. Are you a citizen of the United States?			16. If you have a disability and require some testing assistance, (e.g. enlarged print, etc.) explain on separate sheet of paper and advise Civil Service staff before the test. 17. List any licenses, certifications or other professional registrations. _____ _____ _____																		
7. If not a citizen of the United States, are you a registered alien with government permission to work in this country?																					
8. Are you a registered voter of the City or Parish in which you reside?																					
9. Have you in the past worked, full-time or part-time, for the former Lafayette City Government? If yes, state which department.																					
10. Have you in the past worked, full-time or part-time, for the former Lafayette Parish Government? If yes, state which department.			18. If you are applying for clerical work, answer the following: Are you trained or experienced in the following skills: <div style="display: flex; justify-content: flex-end; font-size: small;"> <div>Typing</div> <div>Yes <input type="checkbox"/> No <input type="checkbox"/></div> </div> <div style="display: flex; justify-content: flex-end; font-size: small;"> <div>Shorthand</div> <div>Yes <input type="checkbox"/> No <input type="checkbox"/></div> </div> List any office machines which you are skilled in operating. <div style="display: flex; justify-content: flex-end; font-size: small;"> <div></div> <div>Yes</div> <div>No</div> </div> <table border="1" style="width: 100%; font-size: x-small;"> <tr><td>Dictaphone</td><td></td><td></td></tr> <tr><td>Copier</td><td></td><td></td></tr> <tr><td>Calculator</td><td></td><td></td></tr> <tr><td>Key Punch Machine</td><td></td><td></td></tr> <tr><td>Personal Computer</td><td></td><td></td></tr> <tr><td>List any other Machines</td><td></td><td></td></tr> </table>	Dictaphone			Copier			Calculator			Key Punch Machine			Personal Computer			List any other Machines		
Dictaphone																					
Copier																					
Calculator																					
Key Punch Machine																					
Personal Computer																					
List any other Machines																					
11. Have you previously worked, full-time or part-time, for the Lafayette Consolidated Government? If yes, state which department.																					
12. Do you currently work for the Lafayette Consolidated Government? If yes, state which department.																					
13. Within the past 5 years have you been discharged from a position because your work or conduct was unsatisfactory? If yes, explain in item #24 on back.																					
14. May inquiry be made of your present and/or past employer concerning your work record, qualifications, etc.?																					
15. Have you ever been CONVICTED, PLACED ON PROBATION, OR A SUSPENDED SENTENCE, for an offense other than minor traffic violations? (Convictions are not necessarily a bar to employment). If yes, explain in Item #25 on back.																					

THE LAFAYETTE CONSOLIDATED GOVERNMENT IS AN EQUAL OPPORTUNITY EMPLOYER

EDUCATION

19. Circle the last grade of school you completed:

Grade School

High School

List your education since high school including colleges, business, trade, correspondence, and military service schools.

Colleges, Universities and Junior Colleges Attended

NAME AND LOCATION	Date Attended		Credit Hours	Major	Degree and Year
	From	To			

Business or Trade Schools Attended

NAME AND LOCATION	Date Attended		Courses Completed	Date of Diploma or Certificate
	From	To		

Correspondence or Military Courses Completed

NAME AND LOCATION	Length of Course	Courses Completed	Date Completed

MILITARY SERVICE

20. Are you claiming Veteran's Preference? ____ If yes, then complete the following and present your DD214 before taking test.

Branch of Service
(Army, Navy, etc.)

Rank at time of Separation

Date Entered Active Duty Date	Separated From Active Duty	Military Occupation Specialty
	Retired Yes <input type="checkbox"/> No <input type="checkbox"/>	

Was Service Performed on active Full Time Basis With Full Time Pay and Allowance Yes ☐ No ☐

21. Experience: Begin with your present or latest position and work backwards. Account for all periods of employment or unemployment. GIVE YOUR DUTIES AND RESPONSIBILITIES IN SUCH DETAIL AS TO MAKE YOUR QUALIFICATIONS CLEAR.

STUDY THE FOLLOWING EXAMPLE:

Place: Frankfort, KY
From: Oct. 19 64 to July 19 69
Month Yr. Month Yr.Name of Employer:
Commonwealth of Kentucky
AddressFinance Bldg. Auditor's Office
Phone #
233-3333Kind of Business or Organization
Public ServiceWas this a Supervisory Position?
YesName and Title of Your Immediate Supervisor
A.C. Cole - Asst. State AuditorReason for Leaving
To Enter Army

Exact Title of Your Position: Senior Auditor

Salary: Starting \$ 910.00 per month, Final \$ 1,099.00

DUTIES AND RESPONSIBILITIES: Made field audits of accounts of state departments or political subdivisions or of persons and business firms subject to taxation or regulation by the State. Made assignments and reviewed the work of assistants; prepared reports in connection with audits made; gave instructions and direction to public officials in connection with approved methods of accounting for public funds. Occasionally testified in courts on matters involving audits completed.

1) PRESENT OR LAST POSITION

Place: _____

Exact Title of Your Position: _____

From _____, _____ to _____, _____
Month Yr. Month Yr.

Salary: Starting \$ _____ per _____, Final \$ _____

Name of Employer: _____

Duties and Responsibilities: _____

Address: _____

Phone # _____

Kind of Business or Organization: _____

Was this a Supervisory Position? _____

Name and Title of Your Immediate Supervisor: _____

Reason for Leaving: _____

2) NEXT PREVIOUS POSITION

Place: _____

Exact Title of Your Position: _____

From _____, _____ to _____, _____
Month Yr. Month Yr.

Salary: Starting \$ _____ per _____, Final \$ _____

Name of Employer: _____

Duties and Responsibilities: _____

Address: _____

Phone # _____

Kind of Business or Organization: _____

Was this a Supervisory Position? _____

Name and Title of Your Immediate Supervisor: _____

Reason for Leaving: _____

3) NEXT PREVIOUS POSITION

Place: _____

Exact Title of Your Position: _____

From _____, _____ to _____, _____
Month Yr. Month Yr.

Salary: Starting \$ _____ per _____, Final \$ _____

Name of Employer: _____

Duties and Responsibilities: _____

Address: _____

Phone # _____

Kind of Business or Organization: _____

Was this a Supervisory Position? _____

Name and Title of Your Immediate Supervisor: _____

Reason for Leaving: _____

22. List volunteer experience here:

4) NEXT PREVIOUS POSITION

Place: _____

Exact Title of Your Position: _____

From _____ , _____ to _____ , _____
Month Yr. Month Yr.

Salary: Starting \$ _____ per _____ , Final \$ _____

Name of Employer: _____

Duties and Responsibilities: _____

Address: _____

Phone # _____

Kind of Business or Organization: _____

Was this a Supervisory Position? _____

Name and Title of Your Immediate Supervisor: _____

Reason for Leaving: _____

REFERENCES

23. List three persons (do not list relatives or people who have worked for you) who have definite knowledge of your qualifications and fitness for the position for which you are applying.

FULL NAME	ADDRESS (Complete)	PHONE NO.	BUSINESS or OCCUPATION

REMARKS

24.

25.

26.

YOU MUST SIGN APPLICATION

I certify that all statements made in this application are true, complete and correct to the best of my knowledge. I realize that any misrepresentation herein may cause my application to be rejected, my name removed from the employment list, or I may be subject to dismissal from the employment of the Lafayette Consolidated Government.

Signature

Date

LINEMAN III

PURPOSE AND NATURE OF WORK

Position is responsible for skilled independent work in installation, maintenance, and repair of overhead and underground power lines and related components of the city-parish electrical transmission and distribution system. Position is subject to 24-hour call and work is sometimes hazardous. The objective is the application of electrical skills and knowledge to a variety of electrical transmission and distribution work including diagnosis of power problems. Incumbent reports to a technical supervisor and may be assisted by a Lineman I or II.

ILLUSTRATIVE EXAMPLES OF WORK (Note: These examples are intended only to illustrate the various types of work performed by incumbents in this class. All of the duties performed by one incumbent may not be listed, nor does any incumbent necessarily perform all these duties).

Climbs utility poles and uses a bucket truck to work on energized primary and secondary power lines and equipment. Installs, maintains, repairs or replenishes transmission and distribution lines, transformers, switchgear, lightning arresters, metering devices, ground rods, crossarms, and insulators. Energizes transmission and distribution lines. Diagnoses power problems. May offer and implement solutions to power problems. Operates a pole setting truck, digs holes with machinery, and sets utility poles. Installs underground wiring, transformers, terminations, and related components. Installs consumer service lines from poles. Repairs underground facilities within the system. Makes voltage checks on lines and transformers. Installs, replaces, and repairs street lights. Assists in training Linemen I or II.

Performs related work as required.

NECESSARY KNOWLEDGE, ABILITIES AND SKILLS

Considerable knowledge of the standard methods, materials, tools and equipment used in the installation, maintenance and repair of electrical transmission and distribution lines and related components.

Considerable knowledge of the occupational hazards and safety precautions of lineman work.

Ability to climb utility poles and work at varying heights, and to perform electrical work in tight spaces underground.

Ability to install, maintain, and repair electrical transmission and distribution lines and related components.

Ability to observe work and remain alert while working under stress and adverse conditions for extended periods of time and at irregular hours.

Ability to locate, diagnose, and repair defects in electrical systems.

Ability to understand and execute oral and written instructions, and to interpret electrical diagrams and plans.

Ability to establish and maintain effective relationships with supervisors and employees.

Skill in the use and care of the tools, equipment, vehicles, and materials used in the work.

DESIRABLE TRAINING AND EXPERIENCE

Graduation from high school supplemented by courses in basic electricity, and experience as a Lineman II; or any equivalent combination of training and experience.

MINIMUM NECESSARY REQUIREMENT

At least seven years safe journeyman lineman experience or five years experience working under the direction of a journeyman lineman and approved training in line work. Experience includes the repair of energized conductors, connecting transformers, replacing poles, operating line and bucket trucks, and related tasks in all weather conditions.

NECESSARY SPECIAL REQUIREMENT

Possession of the appropriate class driver's license, as required by the State of Louisiana.

RECRUITING INFORMATION

The following information does not become part of your application for employment. Your answers will neither help nor hinder your chance for employment with the Lafayette Consolidated Government. They do, however, help us to assess our recruiting efforts, as well as to monitor the progress of our Equal Employment Opportunity Program. Therefore, we ask your cooperation in providing the following information. Thank you.

1. DATE OF APPLICATION: _____
month day year

2. NAME: _____
last first middle initial

3. SOCIAL SECURITY NO: _____

4. BIRTH DATE _____
month day year

5. JOB APPLIED FOR: _____

6. SEX (Please Check): _____ Male
_____ Female

**7. HOW DO YOU DESCRIBE YOURSELF IN TERMS OF THE FOLLOWING GROUP?
PLEASE CHECK.**

- _____ A. American Indian (including Aleuts and Eskimos)
_____ B. Black/African-American/African
_____ C. White/Caucasian/European/Middle Eastern
_____ D. Hispanic/Chicano/Puerto Rican/Mexican American/Latin American
_____ E. Oriental/Asian American/Pacific Islander
_____ F. Disabled as defined by the Americans with Disabilities Act

8. HOW DID YOU HEAR ABOUT THE JOB FOR WHICH YOU APPLIED? PLEASE CHECK.

- _____ A. Lafayette Daily Advertiser
_____ B. Out-of-town newspaper
_____ C. Professional journal
_____ D. Radio
_____ E. Civil Service bulletin board
_____ F. Present city-parish employee
_____ G. University Placement Office
_____ H. Louisiana State Employment Office
_____ I. Other

Please Read The Following Information

LAFAYETTE CONSOLIDATED GOVERNMENT

NOTICE TO APPLICANTS

PRE-EMPLOYMENT DRUG TESTING

The LAFAYETTE CONSOLIDATED GOVERNMENT has a policy prohibiting the possession, distribution, use, consumption, or being under the influence of, alcohol or illegal or unauthorized drugs or other unauthorized, controlled substances, in order to provide a safe and healthful environment for employees, visitors and members of the general public. Therefore, those applicants selected for employment with the LAFAYETTE CONSOLIDATED GOVERNMENT will be required to submit to a urine drug screen test and shall be dropped from consideration of employment if the testing results indicate a detectable amount of illegal or unauthorized substances or an alcohol level in excess of 0.04.

Individuals who have been disqualified due to positive test results shall be ineligible to reapply for work with the LAFAYETTE CONSOLIDATED GOVERNMENT for a period of two years after having been dropped from consideration. Upon reapplication, those applicants must show proof of their completion of a reasonable drug and alcohol treatment or counseling program.